



VOLUNTEERING

Administration

Date Submitted:

ET

Follow Up:

SQ

VOLUNTEER APPLICATION

APPLICANT

Date of Application:

Name (First, Last):

Position(s) of Interest:

Gallery Assistant

Programming Liaison

Special Events/Occasional

CONTACT

Address:

Phone (Main):

Phone (Alternate):

Email:

By checking this box, I agree to receive periodic emails from the Vernon Public Art Gallery about Volunteer Opportunities

How did you hear about VPAG Volunteering?

What interests you about volunteering at the VPAG?



VOLUNTEERING

ADDITIONAL INFORMATION

Do you have any previous/additional volunteer experience? If so, please provide a brief description:

Are there specific skills or experiences of yours that you believe would benefit the VPAG?

If you speak another language, would you be willing to translate or interpret? Yes No

What languages do you speak?

AVAILABILITY

Monday	Mornings	Weekly (Scheduled regular shift)
Tuesday	Afternoons	Monthly (Scheduled, regular shift)
Wednesday	Evenings	On-Call (Special Events and Occasional Shifts)
Thursday	Flexible	
Friday		
Weekends		

REFERENCES

Please provide references for previous work or volunteer experience:

Name: _____

Relationship/Connection: _____

Phone: _____

Email: _____

Name: _____

Relationship/Connection: _____

Phone: _____

Email: _____